Effective October 1, 2003 O 790 720												
<u></u>		SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY										
TO	OTAL CLAIMS		27					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	£ 385,00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	2.7 minus 20=		*	.)		X\$ 9=	·Ca-	OR	X\$18=	
IN	DEPENDENT C	LAIMS		inus 3 ≓	0			X43=	10/	OR	X86=	
ML	JLTIPLE DEPEN	NDENT CLAIM PI	ESENT					+145=	1	OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	LKHO.	4	TOTAL	
CLAIMS AS AMENDED - PART II OTHER THAI												THAN
É	2-7-05	(Column 1)				(Column 3)	· ·_	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 8	Minus	- 2°	7	=		X\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF M	Minus			=		X43=		OR	X86=	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
								TOTAL	3		. TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)											AUDII. PEET	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	SNDCAG.	CI AII A			X43=		OR	X86=	
لب	FIRST FRESE	NIATION OF MU	LIPLE DEP	ENDENT	CLAIM			+145=		OR	+290=	
								TOTAL		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)									•			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FI	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	44		.		X\$ 9=		OR	X\$18=	
AME.	Independent		Minus	***		=	+	X43=			X86=	
	FIRST PRESE	VITATION OF MU	LTIPLE DEP	ENDENT	CLAIM		-			OR		
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
	the "Highest Nun the "Highest Nun	nber Previously Pai nber Previously Pai her Previously Paid	d For IN THIS d For IN THIS	SPACE is I SPACE is I	ess than less than	20, enter "20." 3, enter "3."		TOTAL		OR A	TOTAL DOIT. FEE	

Application or Docket Number